

CONTRACT #4
RFS # 359.62-039-06

**Department of Children's
Services**

VENDOR:
**Metro Center Healthcare
Group**

REQUEST: NON-COMPETITIVE AMENDMENT

PAC

RECEIVED

MAR 03 2006

FISCAL REVIEW

APPROVED

Commissioner of Finance & Administration

Date:

EACH REQUEST ITEM BELOW MUST BE DETAILED OR ADDRESSED AS REQUIRED.

1) RFS #	359.62-039-06	
2) State Agency Name :	Department of Children's Services	
EXISTING CONTRACT INFORMATION		
3) Service Caption :	Provision of Medical Services to Students at Woodland Hills and New Visions Youth Development Centers	
4) Contractor :	Metro Center Healthcare Group	
5) Contract #	FA-06-16676	
6) Contract Start Date :	January 1, 2005	
7) <u>Current</u> Contract End Date IF <u>all</u> Options to Extend the Contract are Exercised :	June 30, 2010	
8) <u>Current</u> Total Maximum Cost IF <u>all</u> Options to Extend the Contract are Exercised :	\$270,000.00	
PROPOSED AMENDMENT INFORMATION		
9) <u>Proposed</u> Amendment #	One	
10) <u>Proposed</u> Amendment Effective Date : See attached explanation as this Request requires an OCR response within 60 days after F&A receipt	April 1, 2005 2006	
11) <u>Proposed</u> Contract End Date IF <u>all</u> Options to Extend the Contract are Exercised :	June 30, 2010	
12) <u>Proposed</u> Total Maximum Cost IF <u>all</u> Options to Extend the Contract are Exercised :	\$277,000.00	
13) Approval Criteria : (select one)	<input checked="" type="checkbox"/> use of Non-Competitive Negotiation is in the best interest of the state <input type="checkbox"/> only one uniquely qualified service provider able to provide the service	
14) Description of the Proposed Amendment Effects & Any Additional Service :		
The amendment increases the FY 2006 liability by five thousand dollars, (\$5,000.00) for services at New Visions Youth Development Center (359.62) and Two Thousand dollars (\$2,000) at Woodland Hills Youth Development Center (359.62). The increased liability will pay for medical services costs through the end of Fiscal Year 2006. New services are not being requested.		

15) Explanation of Need for the Proposed Amendment :

The DCS facility, NVDYDC, is expecting its student population to double from the present number of twelve female student residents to twenty-four by June 30, 2006. The amended increase will cover the medical services costs for those students associated with this increase. Also, WHYDC is experiencing projected utilization rate that will exceed current budgeted amounts for these services by the end of FY 2006.

16) Name & Address of Contractor's Current Principal Owner(s) :
(not required if proposed contractor is a state education institution)

Melvin Lightford, M.D.
Metro Center Healthcare, PC.
131 French Landing
Nashville, TN, 37228

17) Documentation of Office for Information Resources Endorsement :
(required only if the subject service involves information technology)

select one:



Documentation Not Applicable to this Request



Documentation Attached to this Request

18) Documentation of Department of Personnel Endorsement :
(required only if the subject service involves training for state employees)

select one:



Documentation Not Applicable to this Request



Documentation Attached to this Request

19) Documentation of State Architect Endorsement :
(required only if the subject service involves construction or real property related services)

select one:



Documentation Not Applicable to this Request



Documentation Attached to this Request

20) Description of Procuring Agency Efforts to Identify Reasonable, Competitive, Procurement Alternatives :

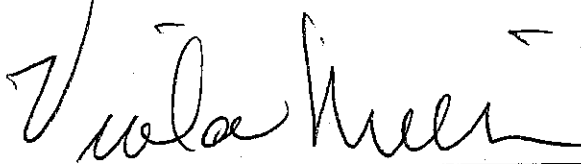
Procurement alternatives have not been attempted as this vendor is the current contractor having won the contract through a competitive procurement.

21) Justification for the Proposed Non-Competitive Amendment :

The medical services provided under this contract are required services and must be available to students at both NVDYDC and WHYDC.

REQUESTING AGENCY HEAD SIGNATURE & DATE :

(must be signed & dated by the ACTUAL procuring agency head as detailed on the Signature Certification on file with OCR— signature by an authorized signatory will be accepted only in documented exigent circumstances)



Agency Head Signature

Date

Explanatory Note Regarding: Request submitted to F&A in less than 60 days.

The initial budget for the New Visions YDC facility could not be determined with accuracy at the outset of FY 2006. Recently, the DCS Contracts Section had begun efforts to amend certain professional services contracts at the NPYDC and WHYDC facilities that needed adjusting due to greater than expected utilization rates. However, while engaged in the process we were also made aware that NPYDC was expecting an increase in the student population, which would require amendments of additional contracts as well as those on which work had already begun. Rather than repeat the amendment process for these contracts so closely together, a request was made for NPYDC And WHYDC to review all service contracts in relation to the utilization rates and population increases and then provide the final amounts for FY 2006 of each contract needing an amendment. DCS needs to obtain approval of these amendments as quickly as possible to ensure that adequate funds remain available. Consequently, we are requesting immediate approval to aid in ensuring our ability to provide uninterrupted payment for services delivered.

Your assistance is greatly appreciated.

**AMENDMENT ONE
TO
FA-06-16676-01
BETWEEN THE STATE OF TENNESSEE
DEPARTMENT OF CHILDREN'S SERVICES
AND
METRO CENTER HEALTHCARE GROUP**

This Contract, by and between the State of Tennessee, Department of Children's Services (DCS), hereinafter referred to as the State, and Metro Center Healthcare Group, hereinafter referred to as the Contractor, is hereby amended as follows:

1. Delete Section C.1. in its entirety and insert the following in its place:

C.1. Maximum Liability. In no event shall the maximum liability of the State under this Contract exceed Two Hundred Seventy-Seven Thousand Dollars, (\$277,000.00). The maximum liability of the State for fiscal year 2006 shall not exceed Thirty-Seven Thousand Dollars (\$37,000.00). Fiscal years 2007-2010 shall not exceed Sixty Thousand dollars (\$60,000.00) per fiscal year. The Payment Rates in Section C.3 shall constitute the entire compensation due the Contractor for the Service and all of the Contractor's obligations hereunder regardless of the difficulty, materials or equipment required. The Payment Rates include, but are not limited to, all applicable taxes, fees, overheads, profit, and all other direct and indirect costs incurred or to be incurred by the Contractor.

The Contractor is not entitled to be paid the maximum liability for any period under the Contract or any extensions of the Contract for work not requested by the State. The maximum liability represents available funds for payment to the Contractor and does not guarantee payment of any such funds to the Contractor under this Contract unless the State requests work and the Contractor performs said work. In which case, the Contractor shall be paid in accordance with Payment Rates detailed in Section C.3. The State is under no obligation to request work from the Contractor in any specific dollar amounts or to request any work at all from the Contractor during any period of this Contract.

The other terms and conditions of this contract not amended hereby shall remain in full force and effect.

IN WITNESS WHEREOF,

METRO CENTER HEALTHCARE GROUP:

CONTRACTOR SIGNATURE

DATE

MELVIN W. LIGHTFORD, MD

DEPARTMENT OF CHILDREN'S SERVICES:

Viola P. Miller, Commissioner

DATE

APPROVED:

DEPARTMENT OF FINANCE AND ADMINISTRATION:

M.D. Goetz, Jr., Commissioner

DATE

DEPARTMENT OF PERSONNEL:

Nat E. Johnson, Acting Commissioner

DATE

COMPTROLLER OF THE TREASURY:

John G. Morgan, Comptroller of the Treasury

DATE

CONTRACT SUMMARY SHEET

8-8-05

RFS #		Contract #	
359.62-039-06		FA-06-16676-00	
State Agency		State Agency Division	
Department of Children's Services		Contracts Administration	
Contractor Name		Contractor ID # (FEIN or SSN)	
Metro Center Healthcare Group		<input type="checkbox"/> C- or <input checked="" type="checkbox"/> V- 621726417-00	

Service Description			
Medical Services			
Contract Begin Date	Contract End Date	SUBRECIPIENT or VENDOR?	
01/01/2006	06/30/2010	Vendor	

Mark if Statement is TRUE

☒ Contractor is on STARS as required
 ☒ Contractor's Form W-9 is on file in Accounts as required

Allotment Code	Cost Center	Object Code	Fund	Funding Grant Code	Funding Subgrant Code
35962	550	084	11		

FY	State	Federal	Interdepartmental	Other	TOTAL Contract Amount
2006	30,000.00				30,000.00
2007	60,000.00				60,000.00
2008	60,000.00				60,000.00
2009	60,000.00				60,000.00
2010	60,000.00				60,000.00
TOTAL	270,000.00				270,000.00

— COMPLETE FOR AMENDMENTS ONLY —		
FY	Base Contract & Prior Amendments	THIS Amendment ONLY
TOTAL		
End Date:		

State Agency Fiscal Contact & Telephone #
Kathy Jones, 7 th Floor Cordell Hull Building, 615-741-0581
State Agency Budget Officer Approval
<div style="text-align: right; margin-top: -20px;">1/10/06</div>
Funding Certification (certification required by HCA 58-4-5113, that there is a balance in the appropriation from which the obligated expenditure is required to be paid that is not otherwise encumbered to pay obligations previously incurred)

Contractor Ownership					
<input checked="" type="checkbox"/> African American	<input type="checkbox"/> Disabled	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Small Business	<input type="checkbox"/> NOT minority/disadvantaged	
<input type="checkbox"/> Asian	<input type="checkbox"/> Female	<input type="checkbox"/> Native American	<input type="checkbox"/> OTHER minority/disadvantaged—		

Contractor Selection Method			
<input checked="" type="checkbox"/> RFP	<input type="checkbox"/> Competitive Negotiation	<input type="checkbox"/> Alternative Competitive Method	
<input type="checkbox"/> Non-Competitive Negotiation	<input type="checkbox"/> Government	<input type="checkbox"/> Other	

Procurement Process Summary

This vendor was chosen as a result of a RFP. The vendor was the sole proposer and his bid packet was acceptable according to the RFP evaluators.

PROCESS
 JAN 23 2006

DIRECTOR OF ADMIN